A LINE NATIONAL ROOM

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Numb r

Effective October 1, 2001

10074673

												•
CLAIMS AS FILED - PART I (Column 1) (Column 2						mn 2)		SMALL EI	YITIY	OR	OTHER SMALL	
TOTAL CLAIMS 17								RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TC	TAL CHARGEA	BLE CLAIMS	// minus 20=		•			X\$ 9=	.	OR	X\$18=	
INDEPENDENT CLAIMS			3 mi	nus 3 =	*			X42=		OR	X84=	·
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	370	OR	TOTAL	
(Column 1) (Column 2) (Column 3)								SMALL		OR	OTHER	
			(Colum				SINALL			SHIALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI/ TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 17	Minus	** Zc	<u>.</u>			X\$ 9=	150	, OR	X\$18=	/ .
	Independent	• 3	Minus		5	= _	l	. X42≈		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		1	+140=		OR	+280=	
TOTAL											TOTAL	~
S-4-0 4 ADDIT. FEEOH ADDIT. FEEOH												
(Column 1) (Column 2) (Column 3)											<u></u>	
AMENDMENT B		- CLAIMS		- HIGH	iest — Ber — ·	PRESENT	IΞΓ		ADDI-	4		-ADD/-
		AFTER AMENDMENT		PREVIO PAID	DUSLY	EXTRA "		RATE	TIONAL PEE		RATE	TIONAL FEE
	Total	. 16.	Minus	*2	0	= _		X\$ 9=		OR	X\$18=	:./ .
	Independent	* 3 NTATION OF MU	Minus	***	3		ŀſ	X42=		OR	X84=	<i>/</i> ·
	FINST FRESE	NIATION OF MC	CIPLE DEP	ĖNDENI	CDAIM		, L	+140=(OR	+280=	
	TOTAL									OR	TOTAL	
ADDIT. FEEL ADDIT. FEEL												
-		(Column 1) CLAIMS		(Colur		(Column 3)				1		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	7 5-6-	OR	X\$18=	7 56
	Independent	*	Minus	***		=]	X42=			X84=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							~~ ~		OR	707-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
		mber Previously Pal hber Previously Pal					er four	nd in the app	propriate box	k in co	lumn 1.	•